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Bib Data Sheet

CONFIRMATION NO. 5733

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|------------------------------------|---|---------------------|-------------------------------|---|
| <b>SERIAL NUMBER</b><br>10/516,411 | <b>FILING OR 371(c) DATE</b><br>12/02/2004<br><b>RULE</b> | <b>CLASS</b><br>250 | <b>GROUP ART UNIT</b><br>2881 | <b>ATTORNEY DOCKET NO.</b><br>P-7452-US |
|------------------------------------|---|---------------------|-------------------------------|---|

## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a 371 of PCT/IL03/00457 06/01/2003 which claims benefit of 60/393,747 07/08/2002 and claims benefit of 60/448,808 02/20/2003  
*len yes*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

ISRAEL 150054 06/05/2002  
 ISRAEL 150055 06/05/2002  
*len yes*

## \*\* SMALL ENTITY \*\*

|  |                                   |                              |                           |                                |
|--|-----------------------------------|------------------------------|---------------------------|--------------------------------|
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no   | <b>STATE OR COUNTRY</b><br>ISRAEL | <b>SHEETS DRAWING</b><br>168 | <b>TOTAL CLAIMS</b><br>22 | <b>INDEPENDENT CLAIMS</b><br>2 |
| 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                                   |                              |                           |                                |
| Verified and Acknowledged <i>Wue</i>   | Examiner's Signature              | Initials                     |                           |                                |

## ADDRESS

49443

## TITLE

Methods for sem inspection of fluid containing samples

|                                   |   |   |
|-----------------------------------|---|---|
| <b>FILING FEE RECEIVED</b><br>413 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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